ODOT TRAY	VEL SUR	VEYS		ROA	ADSI	DE INT	ERVIEW	FC)RM		N	ONSHARED STATIC
Station No	·	<u>.</u>	Date	. I	lour -	am p	m Interv	viewer	Initia	.ls	_ S	heet of
Study Ar	ea											
Vehicle Types Pass, Vehicle Light Truck Motorcycle	Hoavy Truck	Other	Trip Start or End at Home ?	☐ Y••	□ N•	Vehicle Occupancy:	Trip Purpose:		Shopping	Social or Roc.	Other	Commodity Hauled
			ORIGIN		<u> </u>					DESTINA	TION	
Street Adress						· 	Stroot Adross	_ _				
City	- -		·	State		_Zip	City				Stato	Zip
Cross-Street							Cress-Stroot					
Major Landwark							Major Landmark _					
If Origin not in	Study Area,	ntoring re	outo	-			Commoné					
Vehicle Types Pass. Vehicle Light Truck Mataroycle	Hoavy Truck	Other	Trip Start or End at Home ?	□ Y••	□ N•	Vehicle Occupancy:	1	to or Work	Shopping	Secial er Rec.	Other	Commodity Hauled
			ORIGIN							DESTINA	TION	
City				State			City			·	State	Zip
If Origin set in	Study Area,	entering r	oute				Commont					
Vehicle Types Pass. Vehicle Light Truck Metercycle	Heavy Truck	Other	Trip Start or End at Home ?		□ N•	Vehicle Occupancy:	Trip Purpose: Homo from	to or Work	Shopping	Social or Roc.	Other	Commodity Hauled
			ORIGIN							DESTINA	TION	
Street Adress							Street Adress				_	
						_Zip	•					Zip
				•								
If Ontain not in	Seul- Aug.	ntarina w					Comment					· · · · · · · · · · · · · · · · · · ·

"From" Study Area			"To" Stu	udy Area			
Vehicle Types Pass. Vehicle Light Truck Hoavy Othe Metercycle Truck	Trip Start or End at Home ?	Vehicle Occupancy:	from Work Shopping	Commedity Haule			
	ORIGIN		DES	TINATION			
Street Adress			Street Adress				
City	State	Zip	City	StatoZip			
Cross-Stroot		Cross-Street					
Major Landmark			Major Landmark				
If Origin not in Study Area, entering	reufe		If Doctination not in Study Area, exiting rout	•			
Vohiele Typet Pass. Vohiele Light Truck Heavy Othe Metarcycle Truck	Trip Start or End at Home ?	Vehicle Occupancy:		Commodity Hauli ocial ar Rec. Other			
	ORIGIN		DES	TINATION			
Street Adress			Stroot Adress				
City	State	Zip	City	StateZip			
Cross-Stroot			Cross-Stroot				
Major Landmark			Major Landmark				
If Origin not in Study Aros, ontoring	; reute		If Destination not in Study Area, exiting rout	i•			
Vehicle Types Pass. Vehicle Light Truck Heavy Othe Metercycle Truck	Trip Start or End at Home 7	Vehicle Occupancy:		Commodity Haule			
	ORIGIN		DES	TINATION			
Street Adress			Stroot Adress				
City	State	Zip	City	StateZip			
Cross-Street			Cross-Street				

ROADSIDE INTERVIEW FORM

Interviewer Initials _____

If Destination not in Study Area, exiting route _______

Date___ Hour __ _ am pm

SHARED STATION

Sheet __ _ of __ _

ODOT TRAVEL SURVEYS

If Origin not in Study Area, entering route ______

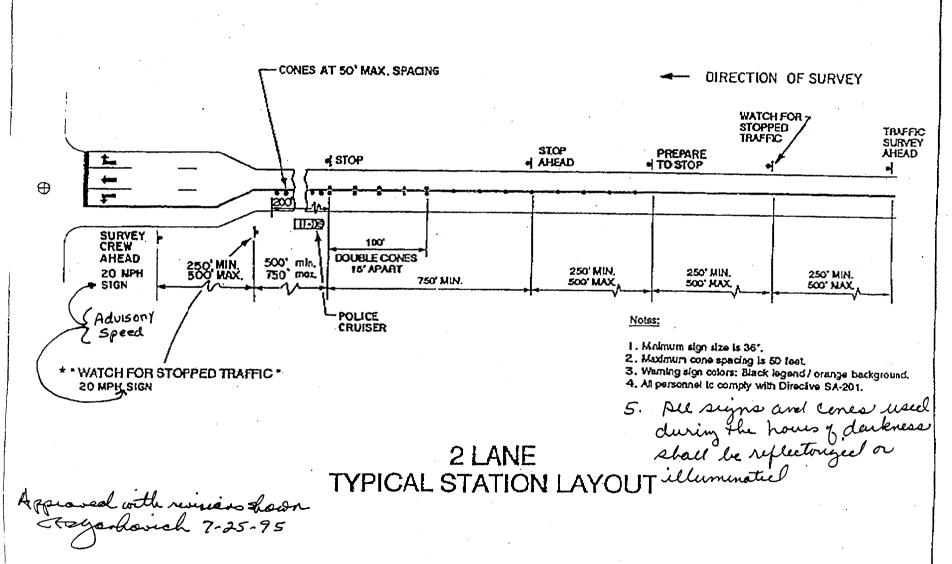
Station No. ____

6	OHIO DEPARTMENT OF TRANSPORTATION CA
	DEAR MOTORIST: The Ohio Department of Transportation is collecting information on travel patterns to
7	plan for needed improvements in the transportation system. Your cooperation will help the State of Ohio better serve your travel needs. Please complete this postage-paid form and mail it back today, even if you have received more than one card.
- 8	A. How many people, including yourself, were in the vehicle when you received this card? (circle one) 1 2 3 4 5 5+
	B. Please identify the type of vehicle Car/Cycle you were driving (circle one) Pickup Truck Other
9	Van/4x4 C. If a truck , what commodity was being hauled?
10	D. Did this trip start at home? (circle one) Yes No
11	E. What was the purpose of this trip when given this card?(circle one) Home to Work School Shopping Recreational Other
12	F. Where did you begin this trip (in this direction) today? Please be as specific as possible. Address Number Street
1	Nearest Cross Street City, Village, Town State Zip Code
2	If the address is not known, can you name an important building or place where this trip began? (hospital, school, shopping center, public building, etc.)
	G. If this trip did not begin in Franklin or Licking County, what route was taken to enter the area?
3	H. Where did you end this trip today? Please be as specific as possible. Address
4	Number Street
υ 	Nearest Cross Street
6	City, Village, Town State Zip Code If the address is not known, can you name an Important building or place where this trip ended? (hospital, school, shopping center, public building, etc.)
6	Please fill out and mail this card as soon as possible. Thank you for your help. information: (614) 466-7170

<u> </u>	OHIO DEPARTMENT OF TRANSPORTATION
6	DEAR MOTORIST: The Ohio Department of Transportation is collecting information on travel patterns to plan for needed improvements in the transportation system. Your cooperation will
7	help the State of Ohio better serve your travel needs. Please complete this postage- paid form and mail it back today, even if you have received more than one card.
	A. How many people, including yourself, were in the vehicle when you received this card? (circle one) 1 2 3 4 5 5+
8	B. Pleas identify the type of vehicle Car/Cycle you were driving (circle one) Pickup Truck Other Van/4x4
9	C. If a truck , what commodity was being hauled?
-	D. Did this trip start at home? (circle one) Yes No
10	E. What was the purpose of this trip when given this card?(circle one) Home to Work School Shopping Work to Home Recreational
11	F. Where did you begin this trip (in this direction) today? Please be as specific as possible. Address
	Number Street
12	Nearest Cross Street
1	City, Village, Town State Zip Code If the address is not known, can you name an important building or place where this trip began? (hospital, school, shopping center, public building, etc.)
2	G. If this trip did not begin in Franklin or Licking County, what route was taken to enter the area?
	H. Where did you end this trip today? Please be as specific as possible.
3	Address Number Street Nearest Cross Street
4	City, Village, Town State Zip Code
	If the address is not known, can you name an important building or place where this trip ended? (hospital, school, shopping center, public building, etc.)
5	I. If this trip did not end in Franklin or Licking County, what route was taken to leave the area?
6	Please fill out and mail this card as soon as possible. Thank you for your help. information: (614) 466-7170

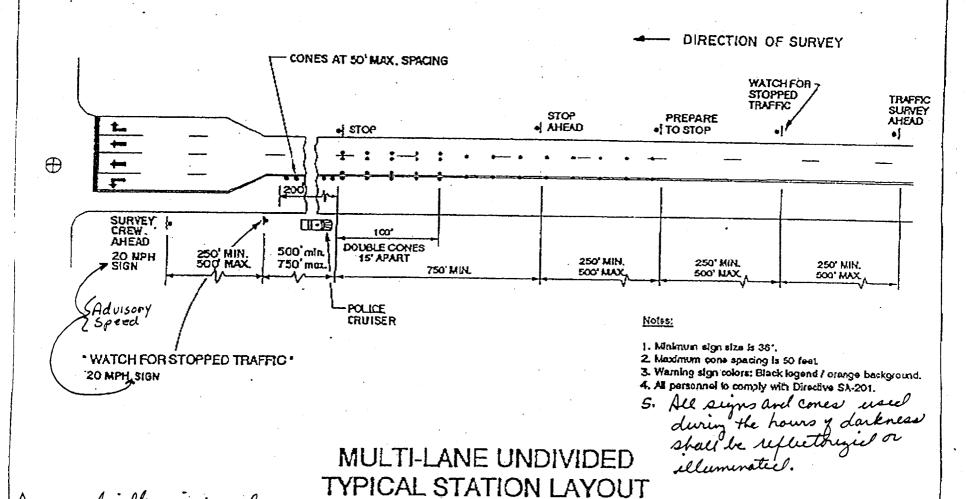
OHIO ROADSIDE SURVEY Traffic Control Plan (TCP)

Facility	Jriediction .
Location	No. of lanes in each direction
Direction	Divided Highway
AADT	Percent Trucks
Peak Hour	Peak Heur Velume
Schoduled Date	#I ~ Police Department
Day	#2 - Police Department
Survey Team	No. of Police Vehicles
Video Team	
Shared Station	
Approximate Sight Distance Available:	foot
cane Width	9' 10' 11' 12' 13' Type of Surface
Shoulder	Widthfoot Paved Y N
Street Lighting	Yes No
s there any place for convenient parking of sur	vey crew vehicles?
amo of nearest cross street	
istance to nearest cross street	miles
OTES:	
OIES:	
	·
ONCERNS:	
	·
	·
SPECIAL REQUIREMENTS:	



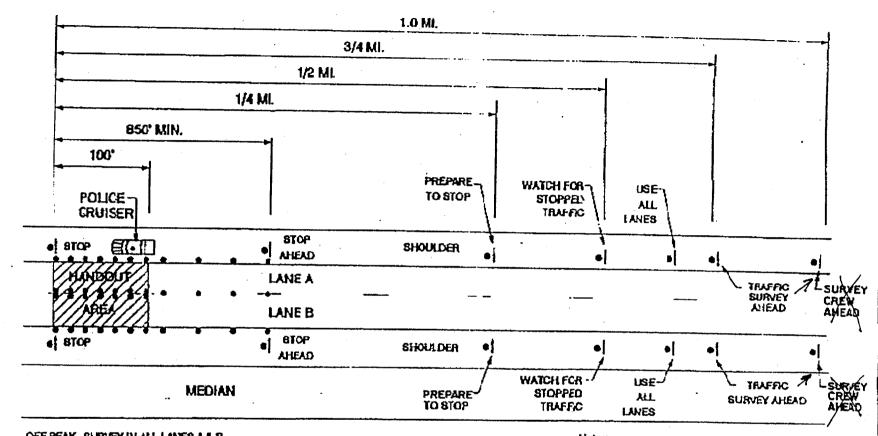
7-21-95

WILBUR SMITH ASSOCIATES



WILBUR SMITH ASSOCIATES

7 - 21 - 95



OFF-PEAK - SURVEY IN ALL LANES A & B

PEAK PERIODS - SURVEY LANE B ONLY - LANE A FREE FLOW BYPASS LANE REMOVE "STOP", "STOP AHEAD" AND " PREPARED TO STOP SIGNS FROM RIGHT SHOULDER DURING PEAK PERIODS

Noise:

- i. Minimum akın siza 48.' 2. Maximum cons specing 50.1
- 3. Wirning sign colors B/O.
- 4. All personnel to comply with Directive SA-201.

TYPICAL MULTI-LANE DIVIDED ARTERIAL

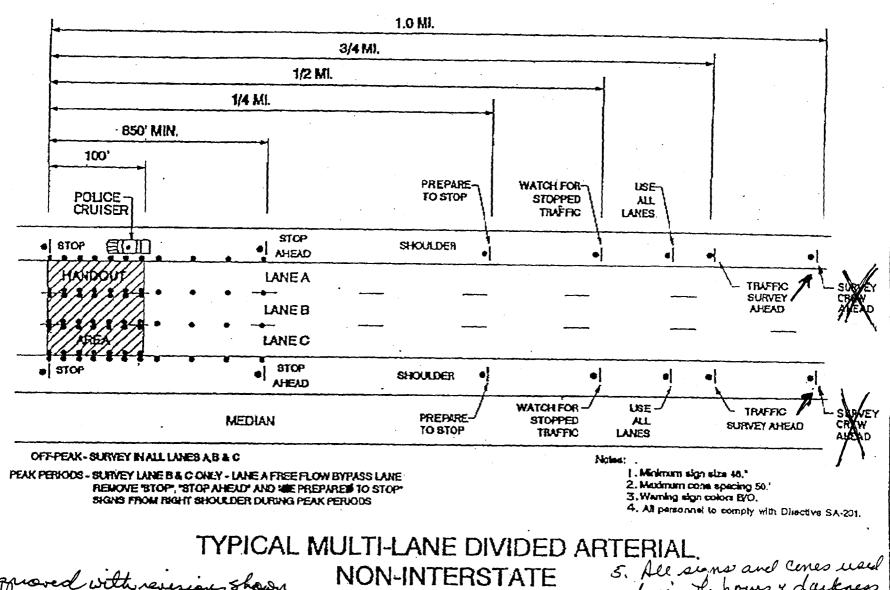
NON-INTERSTATE

2 LANES

5. All signs and cenes used during the hours of clarkness should be suffectinged or illuminated

7 - 21 - 95

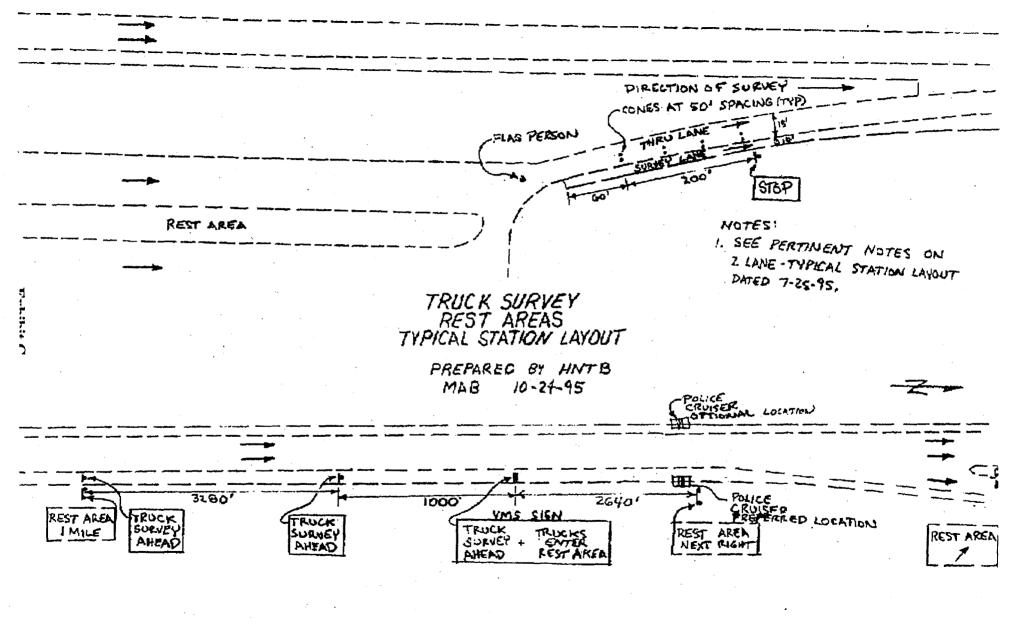
WILBUR SMITH ASSOCIATES



Agriored with reverious shown

NON-INTERSTATE 3 LANES 5. All signs and cenes used during the hours of darkness shall be reflectorized or elluminated 7-21-95

WILBUR SMITH ASSOCIATES



ODOT TRAVEL SURVEYS	$\mathbb{R} \mathbb{O}$	ADSI:	DE INT	ERVIEW FO	ORM			SHARED STATION
Station No	Date	Hour_	am [m Interviewe	r Initia	ls	_ 5	Sheet of
"From" Study Area_					"To" 9	Study A	Area_	
Vahiela Typat			Vehicle Occupancy:	Trip Purpose:				Commodity Hauled
Pass. Vehicle Light Truck Heavy Other Motorcycle Truck	Trip Start er End at Home ?	□ N•		Home to or from Work	Shapping	Secial or Rec.	Other	
	ORIGIN				Ι	DESTINA'	TION	
Street Adress				Stroot Adross				
City	State _		Z ip	City			. State	Zip
Cross-Stroot				Cross Stroot				
Major Landmark								
If Origin not in Study Area, entering r	oute			If Destination not in Study .	Area, exiting	route		
Vehicle Type:	Trip Start or		Vehicle Occupancy:	Trip Purpose:				Commodity Hauled
Pass. Vehicle Light Truck Heavy Other Metarcycle Truck	End at Home ? Yes	□ N•		Home to se from Work	Shopping	Social or Rec.	Other	
	ORIGIN				I	DESTINA	TION	
				i				
Street Adress		. — -		Street Adress				
Stroot Adross								Zip
City	State -		Zip	City			. State	
	State -		Z ip	City			. State	Zip
City	State -	 	Zip	City Cross-Stroot Major Landmark			. State	Zip
City Cross-Stroot Major Landmark If Origin not in Study Area, entering 1 Vehicle Type: Pass. Vehicle Light Truck Heavy Other	outo Trip Start or End at Home ?		Zip	City Cross-Stroot Major Landmark			. State	Zip
City Cross-Street Major Landmark If Origin not in Study Area, entering 1 Vehicle Type: Pass. Vehicle	State		Zip	City Cross-Stroot Major Landmark If Dostination not in Study Trip Purpose: Home to er	Area, exiting	Social or Rec.	. State	Zip
City Cross-Stroot Major Landmark If Origin not in Study Area, entering 1 Vehicle Types Pass. Vehicle Light Truck Heavy Other	outo Trip Start or End at Home ?		Zip	City Cross-Stroot Major Landmark If Dostination not in Study Trip Purpose: Home to er	Area, exiting	reute	. State	Zip
City Cross-Stroot Major Landmark If Origin not in Study Area, entering 1 Vehicle Types Pass. Vehicle Light Truck Heavy Other	State		Zip	City Cross-Stroot Major Landmark If Dostination not in Study Trip Purpose: Home to er	Area, exiting	Social or Rec.	. State	Zip
City Cross-Stroot Major Landmark If Origin not in Study Area, entering a Vohicle Type: Pass. Vohicle Light Truck Heavy Other Motorcycle Truck	Trip Start or End at Home ? Yes	□ N•	Zip	City Cross-Stroot Major Landmark If Destination not in Study Trip Purpose: Homo to or from Work	Area, exiting Shepping	Social or Rec.	Other	Zip
City Cross-Street Major Landmark If Origin not in Study Area, entering a Vehicle Type: Pass. Vehicle Light Truck Heavy Other Metercycle Truck Street Adress	Trip Start or End at Home ? Yes ORIGIN	N _e	Zip	City Cross-Stroot Major Landmark If Destination not in Study Trip Purpose: Homo to or from Work Stroot Adress City	Area, exiting Shopping	Social or Roc.	State	Commodity Hauled
City Cress-Stroot Major Landmark If Origin not in Study Area, entering 1 Vahicle Type: Pass. Vehicle Light Truck Heavy Other Metercycle Truck Street Adress City	ORIGIN State	N _e	Zip	City Cross-Street Major Landmark If Destination not in Study Trip Purpose: Home to or from Work Street Adress City Cross-Street	Area, exiting Shopping	Social or Rec.	Othor TION State	Commodity Hauled